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CONFIRMATION NO. 5804

<b>SERIAL NUMBER</b> 09/997,946	<b>FILING OR 371(c) DATE</b> 11/30/2001 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3694	<b>ATTORNEY DOCKET NO.</b> 1632
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**APPLICANTS**  
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**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a CIP of 09/708,836 11/08/2000 PAT 6,944,150 *Effective Filing Date 11/30/2001 SM.*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
 \*\* 12/28/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> KS	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 32	<b>INDEPENDENT CLAIMS</b> 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> <i>SM</i> Examiner's Signature Initials				

**ADDRESS**  
28005

**TITLE**  
Method and system for providing prepaid data service

<b>FILING FEE RECEIVED</b> 1208	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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